## **COMMONWEALTH OF VIRGINIA**

DEPARTMENT OF HUMAN RESOURCE MANAGEMENT

July 27, 2017

To: All Designated Billing Contacts for Non-Participating Line of Duty Act (LODA) Employers that have LODA Health Benefits Plans Participants

Attached is the premium invoice for your LODA Health Benefits Plans participants during the month of July. Thank you for your patience during the transition to the new LODA Health Benefits Plans and from previous administration by the Virginia Department of Accounts (DOA) to the Department of Human Resource Management (DHRM). DHRM will continue the 30-day payment window used by DOA. This means that payment for this invoice is due by August 28 (the next business day after the 30-day window).

Please take a few moments to review the following information to assist you in understanding your LODA premium invoice:

Each invoice will include the name of the LODA participant for whom you are being billed. This will also include:

- The specific plan in which the individual or family group is enrolled (see below for more information on plan codes);
- The coverage membership level; and
- The total premium amount for the individual or family.
- If the family group has both non-Medicare and Medicare-primary members, Medicare-primary participants will have their own individual ID number since benefits must coordinate with their individual Medicare plan. If the listed participant is not the individual through whom eligibility is obtained (e.g., the disabled individual or surviving family member), the name of the eligible individual will be identified as the "Eligible Par" to assist you in recognizing the participant.

Plan eligibility descriptions and premiums were provided in your March 27 transition information, which is still available at:

http://www.dhrm.virginia.gov/healthcoverage/loda-health-benefits

LOD1, LOD2 and LOD3 plan codes represent the three plans described in this booklet as follows:

- LOD1 = LODA Plan Former LODA Employment
- LOD2 = LODA Plan Current LODA Employment
- LOD3 = LODA Plan Medicare Primary

Please review your invoice to ensure that anyone who is actively working for their LODA employer is enrolled in LOD2. If you identify anyone who should have a plan change, please send an email to <a href="LODA@dhrm.virginia.gov">LODA@dhrm.virginia.gov</a>. This is important since the plan defines coordination of benefits and premium.

## Some reminders:

- As an employer that does not participate in the LODA Death and Health Benefits
  Trust Fund (a non-participating employer), you are responsible for reimbursing
  the Medicare Part B cost for any LODA participant who is enrolled in the
  LOD3/Medicare-primary plan since enrollment in this plan requires enrollment in
  Medicare as the primary claim payer for covered medical services. (Note that
  Medicare-entitled participants who are still actively working for a LODA employer
  should not be in the LOD3 Medicare-primary plan and are not eligible for
  payment/reimbursement of their Part B premium.)
- Some employers requested that their monthly invoice be sent to a third party, but the Code of Virginia specifically requires payment by the non-participating employer and provides remedy for non-payment by the employer. While DHRM will accept a payment from a third party on behalf of an employer, we are unable to request payment from them.
- For most employers, there are multiple recipients of this email and attached invoice. If you wish to change this distribution, please send your request to LODA@dhrm.virginia.gov.

## Your next invoice:

Your invoice for August will be generated as soon as possible, and invoices for September forward should go out on or about the 20<sup>th</sup> of the month prior to the coverage month. Each month, your invoice will reflect any corrections/updates from the previous month's invoice.

Thank you for your cooperation and support during this transition to the new LODA Health Benefits Plans.